

**FEC FORM 5****REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED****To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation DEFENDERS OF WILDLIFE ACTION FUND		3. FEC Identification Number <b>C</b> C90007907
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1130 17TH ST NW		
(c) City, State and ZIP Code WASHINGTON DC 20036		
2. <b>Corporate filers only</b>	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Individual filers only</b>	Name of Employer	Occupation

## 4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☐ 24-Hour Notice ☒ 48-Hour Notice
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM 

M	M
0	6

 / 

D	D
1	9

 / 

Y	Y	Y	Y
2	0	0	8

THROUGH

M	M
0	6

 / 

D	D
1	9

 / 

Y	Y	Y	Y
2	0	0	8

6. TOTAL CONTRIBUTIONS .....

.00

7. TOTAL INDEPENDENT EXPENDITURES.....

211794.00

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

William Lutz

06/20/2008

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 2 / 2

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee  
Wildbunch Consulting

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	0	8

Mailing Address  
1101 30th St NW Suite 500

Amount

11794.00

City	State	Zip Code
Washington	DC	20007

Purpose of Expenditure  
Advertisement productionCategory/  
Type
Office Sought: ☒ House State: CO  
☐ Senate District: 04  
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:  
Marilyn MusgraveCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election  
for Office Sought 11794.00Disbursement For: ☐ Primary ☒ General  
2008  
☐ Other (specify) \_\_\_\_\_Full Name (Last, First, Middle Initial) of Payee  
Abar Hutton

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	0	8

Mailing Address  
6190 Grovedale Court Suite 200

Amount

200000.00

City	State	Zip Code
Alexandria	VA	22310

Purpose of Expenditure  
Advertisement placementCategory/  
Type
Office Sought: ☒ House State: CO  
☐ Senate District: 04  
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:  
Marilyn MusgraveCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election  
for Office Sought 200000.00Disbursement For: ☐ Primary ☒ General  
2008  
☐ Other (specify) \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures .....

211794.00

(b) SUBTOTAL of Unitemized Independent Expenditures .....

211794.00

(c) TOTAL Independent Expenditures .....  
(carry total from last page forward to Line 7)